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L28 ANSWER 2 OF 2 CAPLUS COPYRIGHT 2004 ACS on STN
AN 1997:44914 CAPLUS
DN 126:139316
TI Oncologic, endocrine & metabolic. Angiogenesis inhibition as a drug target for disease: an update
AU Seed, Michael P.
CS Dep. Exptl. Pathology, William Harvey Res. Inst., London, EC1M 6BQ, UK
SO Expert Opinion on Investigational Drugs (1996), 5(12), 1617-1637
CODEN: EOIDER; ISSN: 0967-8298
PB Ashley Publications
DT Journal; General Review
LA English
AB A review, with 187 refs. Angiogenesis is required for the development of many proliferative diseases, including granulomatous disease, such as rheumatoid arthritis, psoriasis and **neoplasia**, as well as diabetic retinopathy. A substantial effort is being made to develop inhibitors of angiogenesis for the treatment of these diseases. This article is an update of a previous review [Colville-Nash & Seed, Curr. Opin. Invest. Drugs (1993) 2:763-813], and reviews the recent developments in the use of: angiostatic steroids, fumagillol derivs., somatostatin analogs, matrix metalloproteinase (**MMP**) inhibitors, modulators of vascular endothelial cell growth factor (VEGF), fibroblast growth factor (FGF), angiostatin, endostatin, platelet factor-4 (PF4), thrombospondin-1 (TSP-1), cell adhesion mols. (integrins and selectins), urokinase plasminogen receptor antagonists, cyclo-oxygenase (COX) and non-steroidal anti-inflammatory drugs (NSAIDs), nitric oxide synthase (NOS), cytokine-suppressing anti-inflammatory drugs (CSAIDs), and drug **combinations**. Most of these approaches have been shown to be effective in inhibiting tumor growth in vivo, and in many models of inflammation. The field has, therefore, a very wide range of effective drug targets which are being exploited. Many areas are still limited by their reliance on high mol. weight mol. technologies, antibodies and constructs; however, low mol. weight compds. are now being sought in areas such as cytokine suppression, VEGF, **MMPs**, COX, NOS, and adhesion mols. Angiostatic therapy is a rapidly advancing therapeutically viable and exiting field.
RE.CNT 187 THERE ARE 187 CITED REFERENCES AVAILABLE FOR THIS RECORD
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=> s mmp and radiation
L31          136 MMP AND RADIATION

=> s antineoplastic agents and radiation
L32           34 ANTINEOPLASTIC AGENTS AND RADIATION

=> s l31 and l32
L33            0 L31 AND L32

=> s l6 and radiation
L34           18 L6 AND RADIATION

=> s l32 and l34
L35            1 L32 AND L34

=> s l31 and l6
```

TI Stable inhibition of nuclear factor κB in **cancer** cells does not increase sensitivity to cytotoxic drugs
AU Bentires-Alj, Mohamed; Hellin, Anne-Cecile; Ameyur, Maya; Chouaib, Salem; Merville, Marie-Paule; Bours, Vincent
CS Lab. Med. Chem./Med. Oncol., Univ. Liege, Liege, 4000, Belg.
SO Cancer Research (1999), 59(4), 811-815
CODEN: CNREA8; ISSN: 0008-5472
PB AACR Subscription Office
DT Journal
LA English
AB Several reports indicated that nuclear factor κB (NF-κB) activation by cytokines, cytotoxic drugs, or ionizing **radiation** protects cells against apoptosis. Therefore, we investigated the consequence of NF-κB inhibition on the efficiency of **antineoplastic agents**. HPB, HCT116, MCF7, and OVCAR-3 cells stably expressing a dominant neg. IκBα inhibitor showed a decreased NF-κB activation following treatment with tumor necrosis factor α and various chemotherapeutic agents. However, there was no difference in survival between parental cells and cells expressing mutated IκBα. These studies suggest that, at least in these cell lines, stable NF-κB inhibition did not modify the response to cytotoxic drugs.
RE.CNT 26 THERE ARE 26 CITED REFERENCES AVAILABLE FOR THIS RECORD
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L28 ANSWER 8 OF 12 CAPLUS COPYRIGHT 2004 ACS on STN
AN 1998:91899 CAPLUS
DN 128:212465
TI Topoisomerase I inhibitors: 1. Topotecan
AU Relias, Valerie; Skirvin, J. Andrew
CS Department of Pharmacy, New England Medical Center, Boston, MA, 02111, USA
SO Journal of Oncology Pharmacy Practice (1997), 3(4), 173-185
CODEN: JOPPFI; ISSN: 1078-1552
PB Appleton & Lange
DT Journal; General Review
LA English
AB A review with 70 refs. on the pharmacol., pharmacokinetics, clin. use, and adverse effects of the topoisomerase I inhibitor Topotecan. The authors reviewed the literature through a MEDLINE search of English language articles from 1985 through 1997. Relevant articles cited in the titles obtained from the MEDLINE search were also used. The authors reviewed the current literature in order to discuss the pharmacol., pharmacokinetics, clin. use, toxicity, drug interactions, indications, formulation, dosage and administration, and pharmaceutical issues surrounding the use of Topotecan. The topoisomerase I inhibitors are new **antineoplastic agents** with a unique mechanism of action. Promising areas of application include ovarian **cancer**, lung **cancer**, **radiation** sensitization, and refractory leukemias. Clin. trials detailing its activity in these areas are presented.
RE.CNT 70 THERE ARE 70 CITED REFERENCES AVAILABLE FOR THIS RECORD
ALL CITATIONS AVAILABLE IN THE RE FORMAT

L28 ANSWER 9 OF 12 CAPLUS COPYRIGHT 2004 ACS on STN
AN 1996:691872 CAPLUS
DN 125:316004
TI Paclitaxel combination therapy in the treatment of metastatic breast **cancer**: A review
AU Holmes, Frankie Ann